## SEMI-ANNUAL LOBBYING EXPENDITURE REPORT FOR EMPLOYERS OF LOBBYISTS

Individual Rights

INSTRUCTIONS: This Semi-Annual Lobbying Expenditure Report is for reporting all expenditures relating to lobbying in the State of Tennessee. Pursuant to T.C.A. § 3-6-303(a), this Report is due within forty-five (45) days after the conclusion of the six-month periods ending March 31 and September 30. The Report must be filed with the Tennessee Ethics Commission, 201 4th Avenue North, Suite 1820, Nashville, TN 37243. If you have questions, please feel free to contact the Commission at (615) 253-8634 or e-mail us at <a href="mailto:ethics.counsel@state.tn.us">ethics.counsel@state.tn.us</a>. You must complete every item. Attach additional pages as necessary. Please note that the information listed on this Report will be posted on the Commission's website as required by T.C.A. § 3-6-303(3)(b).

1 a. DATE OF DISCLOSURE5/10/07
b. REPORTING PERIOD [check box]:   October 1 – March 31  April 1 – September 30  2. a. NAME OF CORPORATION/ENTITY  American Bar Association
b. NAME OF CEO, CFO, or TITLE AND NAME of PERSON RESPONSIBLE FOR SUPERVISING LOBBYISTS
Denise Cardman, Acting Director, ABA Office of Governmental Affairs
3. a. ADDRESS Street or Rural Route City State Zip Code
740 15 <sup>th</sup> Street, NW, Washington, DC 20005
b. <b>PHONE NUMBER</b> _202/662-1000
4. LOBBYING INTERESTS
a. List the general subject area(s) lobbied, e.g., "healthcare," "insurance," etc.
_death penalty
b. Describe the general nature and interest of the entity employing or retaining lobbying services, e.g. "insurance company," "professional association," etc.
professional association



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☐ At least \$250,000 but less than \$300,000

5. TOTAL AGGREGATE LOBBYIST COMPENSATION. The any salary, fee, payment, reimbursement or other valuable consider received; however, 'compensation' does not include the sincidental to that person's regular employment."	sideration, or any combination thereof, whether received or to	
State the aggregate total amount of lobbyist compensation compensation paid to any lobbyist who performs duties for the eapportioned to reflect the lobbyist's time allocated for lobbying an of "Lobbying," "Administrative Action" and "Legislative Action," an § 3-6-303(a)(1)(A)-(K). (Check the appropriate box.)	employer in addition to lobbying and related activities shall be not related activities in this state (see more detailed definitions	
☐ Less than \$10,000	At least \$10,000 but less than \$25,000	
☐ At least \$25,000 but less than \$50,000	☐ At least \$50,000 but less than \$100,000	
☐ At least \$100,000 but less than \$150,000	☐ At least \$150,000 but less than \$200,000	
☐ At least \$200,000 but less than \$250,000	☐ At least \$250,000 but less than \$300,000	
☐ At least \$300,000 but less than \$350,000	☐ At least \$350,000 but less than \$400,000	
☐ If the aggregate total amount is \$400,000 or more, you must round the aggregate total to the nearest fifty thousand dollars (\$50,000):		
Tennessee.  Indicate whether they are employed w Lobbyist" box. Attach additional pages as needed. <b>A</b> t	ithin your organization by checking the "In-House Ithority: T.C.A. § 3-6-303(a)(1).	
Tennessee. Indicate whether they are employed w Lobbyist" box. Attach additional pages as needed. <b>A</b> u LOBBYIST NAME _Tom Lee	ithority: T.C.A. § 3-6-303(a)(1).  IN-HOUSE LOBBYIST	
Lobbyist" box. Attach additional pages as needed. <b>A</b> u	Ithority: T.C.A. § 3-6-303(a)(1).  IN-HOUSE LOBBYIST	
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Lobbyist" box. Attach additional pages as needed. Au  LOBBYIST NAME Tom Lee  7. LOBBYING-RELATED EXPENDITURES  NOTE: For the purposes of this Report, any expenditure ma	IN-HOUSE LOBBYIST  IN-HOUSE LOBBYIST  ade for the purpose of achieving a multi-state effect shall  ade for the aggregate total of expenses paid directly by the legislative or administrative action through public opinion or ures include, but are not limited to, costs relating to printing, audiotapes, videotapes, compact discs, digital video discs, rences, postage, telephone related costs, internet services, illing services, travel expenses, grants to issue groups or	
Lobbyist" box. Attach additional pages as needed. Au LOBBYIST NAME Tom Lee  7. LOBBYING-RELATED EXPENDITURES  NOTE: For the purposes of this Report, any expenditure make apportioned equally among those states.  Excluding lobbyist compensation (which is reported under 5 employer to third party vendors, for the purpose of influencing grassroots action in the State of Tennessee. These expendite publishing, advertising, broadcasting, paid announcements, a infomercials, rallies, demonstrations, seminars, lectures, confepublic relations services, governmental relations services, pograssroots organizations or any other expense incurred lobbyic appropriate box.)	IN-HOUSE LOBBYIST  IN-HOUSE LOBBYIST  ade for the purpose of achieving a multi-state effect shall  ade for the aggregate total of expenses paid directly by the legislative or administrative action through public opinion or ures include, but are not limited to, costs relating to printing, audiotapes, videotapes, compact discs, digital video discs, rences, postage, telephone related costs, internet services, illing services, travel expenses, grants to issue groups or	
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☐ At least \$300,000 but less than \$350,000	☐ At least \$350,000 but less than \$400,000
☐ If the aggregate total amount is \$400,000 or more, you (\$50,000):	ou must round the aggregate total to the nearest fifty thousand dollars
8. AGGREGATE TOTAL OF ALL IN-STATE EVE	ENTS
to the Commission pursuant to T.C.A. § 3-6-305(b)(8). Autr	
7	
9. TO BE SIGNED BY REPORTING OFFICIAL (must be	
I certify that the information contained in this Report is truknowledge, information and belief.	ue and that it is a complete and accurate report to the best of my
Signature of Person: Deboran Pleischaker  Print Name of Person: Deboran Pleischaker	7/10/07 Date
	foregoing Report and certify that is complete and accurate to the
Denies a Coopdman	5/15/07
Signature of CEO, CFO or Authorized Representative Print Name of Person: Denise A Card may	Date
I, JAMA TERREU , the undersigned, do (Printed Name of Witness) CFO or Authorized Representate	hereby witness the above signature of the CEO, ive, which was signed in my presence.
5/15/	ė 7
Signature of Witness Date	